

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	45	1/26/01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	C.S.W.		24 Feb. 2001

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	5/20/03
2	✓	✓	1/9/04
3	✓	✓	5/24/04
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
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Best Available Copy

If more than 150 claims or 10 actions  
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